Issue 2: September 2019

Spotlight on Candida auris

Candida auris is an emerging fungus that presents a serious global health threat. This novel multi-drug resistant organism (N-MDRO) has caused several healthcare facility outbreaks in the United States and abroad, and as of July 31, 2019, the CDC has confirmed 769 clinical cases across 13 states. This novel pathogen is of particular health concern because:

- It can cause severe, antibiotic-resistant infections;
- It is difficult to identify using traditional identification methods;
- It can survive on surfaces in healthcare settings for long periods; and
- It can spread easily to patients in healthcare settings.

On May 7, 2019, the Los Angeles County Department of Public Health (LAC DPH) released a Los Angeles Health Alert Network (LAHAN) notification for healthcare providers describing the <u>first cases of C. auris in Southern California</u>, primarily in long-term acute care (LTAC) hospitals in Orange County.² As September 1, 2019, there is no known active transmission of *C. auris* in LAC. However, there is ongoing transmission in Orange County, as well as in other states and countries, which could spread this organism to individuals LAC.

The LAC DPH Acute Communicable Disease Control (ACDC) program is committed to assisting healthcare facilities to identify, control, and prevent infections from *C. auris*.

Who is at highest risk for C. auris?

LAC DPH currently considers the following people to be at highest risk for *C. auris*: colonization or infection:

- Roommates of *C. auris*-positive patients/residents.
- Patients/residents who have had an overnight stay in a healthcare facility in a country with transmission or multiple cases of C. auris.³
- Patients/residents who are colonized with <u>carbapenemase-producing</u> organisms, such as <u>carbapenem-resistant Enterobacteriaceae</u> (CRE).⁴
- Patients/residents on a mechanical ventilator or tracheostomy being admitted from a long-term acute care hospital (LTAC) or skilled nursing facility with transmission of *C. auris*.
- Patients/residents who have had an overnight stay in a healthcare facility in the past 12 months in a <u>state with transmission C. auris</u>, including New York, New Jersey, and Illinois.⁵

Note: Patients/residents meeting *any* of these criteria should be screened for *C. auris* colonization. LAC DPH can provide additional guidance and free colonization testing swabs if needed by calling ACDC 213-240-7941.

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Infection Control for C. auris

It is important to implement timely and effective infection control measures to contain and prevent the spread of *C. auris*. These include:

- 1. **Contact Precautions.** Place infected or colonized patients/residents on <u>Contact Precautions.</u> The duration of Contact Precautions for colonized patients is currently unknown; however, studies have shown that *C. auris* can remain colonized on a patient for months even after treatment of an infection.
- 2. **Dedicating staff and patient equipment.** Limit spread and exposure wherever possible.
- 3. **Appropriate environmental cleaning.** Ensure the entire patient care/resident's environment is thoroughly cleaned and disinfected. Refer to CDC environmental disinfection guidelines to determine which products are effective against *C. auris*.⁷
- 4. Screening. Since patients may be asymptomatically colonized with *C. auris*, it is important to consider screening patients/residents at high risk for *C. auris* (see above). LACDPH can provide free swabs and testing services, if needed. We recommend patients be placed in empiric Contact Precautions while waiting results of any *C. auris* colonization or confirmatory testing. If you need assistance in determining which criteria to use and/or where these swabs can be sent, please contact us at ACDC 213-240-7941.
- 5. **Review** <u>C. auris checklist</u>. A <u>checklist</u> is attached that can help guide you through ensuring that your facility is prepared to detect and contain *C. auris* if/when it arrives in your facility.

Patient Information

Patients may be worried if and when they are infected or colonized with *C. auris*. Patient guidance and treatment guidance is available to assist with properly informing patients and their families.

Interfacility Communication

It is critical that facilities work together to help slow and prevent the spread of N-MDROs such as *C. auris*:

- Use the <u>interfacility communications guide</u> to ensure the appropriate communication occurs upon patient discharge and that receiving facilities are aware of colonization status of any known MDRO.⁹
- Healthcare facility staff and the resident/patient (or their family) should be notified so that they can implement the appropriate infection control measures immediately upon admission.
- Also make sure the facility's case management team is aware of the threat of *C. auris* so that they can alert when patients may need to be screened upon admission, and ensure that *C. auris* status is relayed upon discharge to a new healthcare facility.

Facilities should <u>not</u> refuse admission of a patient based on infection or colonization status alone, per the CDPH All Facilities Letter (AFL) 19-22.¹⁰



What should my facility do if we suspect C. auris?

- 1. Place the patient on Contact Precautions immediately (see Infection Control above).
- 2. Ensure the appropriate environmental disinfectant is used for all routine cleaning.
- 3. Suspect or confirmed *C. auris* cases should be placed in an individual room. Staff and equipment should be dedicated. If single rooms are not available, you may call ACDC at 213-240-7941 for consultation.
- If a suspect or known positive patient or resident is transferred to your healthcare facility, call ACDC at 213-240-7941 immediately during business hours, per <u>CDPH AFL 19-18</u> and our <u>N-MDRO Reporting</u> <u>Guide</u> so we can assist.^{11,12}

ACDC can assist with *C. auris* rule-out testing and/or screening, if needed. Test results usually take a few days. Please ask your laboratory to save any suspect or confirmed *C. auris* isolates. Do <u>not</u> send specimens to the LAC DPH Public Health Laboratory without consulting with ACDC first.

What is LAC DPH currently doing to prevent the spread of C. auris?

- **Point prevalence surveys (PPS).** These are being performed in high risk settings like LTACs and subacute units of skilled nursing facilities. These surveys take less than a day and are designed to check for asymptomatic carriage of *C. auris* among patients or residents of a facility. If your facility is interested in doing a one-time PPS to determine the burden of *C. auris* colonization, please call ACDC at 213-240-7941.
- Active surveillance of cases from affected healthcare facilities. ACDC is also working very closely with
 public health experts in neighboring Orange County to track possible *C. auris* patients that are
 transferred to LAC healthcare facilities.
- Infection Control Enhancement. LAC DPH is currently offering free, consultative infection control visits to skilled nursing facilities with subacute units. These visits are an opportunity to share information and receive feedback on how to protect your residents from N-MDROs, such as *C. auris*. If your facility is interested in a visit or would like more information, please call ACDC at 213-240-7941.
- Education. LAC DPH hosted a C. auris symposium on June 28, 2019, where national experts provided
 guidance and resources. We have compiled some of that core information in this newsletter to help
 you prepare to detect, contain, and report any suspect or confirmed C. auris in your healthcare facility.





Laboratory Detection for *C. auris*

Many current laboratories cannot detect *C. auris,* but there are important strategies that laboratories can use to ensure this organism is not missed:

- 1. **Identification.** Confirm whether your current detection methods can identify *C. auris*.
 - a. CDC has a <u>detailed algorithm</u> to determine if your current methods can identify *C. auris* or will identify a closely related organism.¹³
 - b. Most laboratories consistently misidentify *C. auris* as another unusual fungus. For example, if using an older version of Vitek 2 YST, you should report *C. haemulonii*, *C. duobushaemulonii*, or Candida spp. not identified as a suspect *C. auris* to LAC DPH.
- 2. **Notification.** Ensure infection prevention and clinical staff are immediately notified when confirmed and suspect *C. auris* cases are identified within your facility.
- 3. **Search for** *C. auris* **in non-sterile sites.** Identify isolates to the species level, including sterile and non-sterile sites. This will allow detection of *C. auris* or organisms that may be misidentified as *C. auris* (such as *C. haemulonii*). If it is not possible to determine species for isolates from all specimen sources, consider doing this for "high-risk" patients at your facility.
- 4. **Consider screening for** *C. auris* **colonization.** Facilities should consider developing a screening protocol for high-risk patients.

NOTE: The LAC DPH Public Health Laboratory can accept suspect *C. auris* isolates for confirmatory testing. However, please do **not** send isolates without first consulting with ACDC 213-240-7941.

LAC DPH Can Help!

Call ACDC (213-240-7941) or email hai@ph.lacounty.gov if you need:

- Assistance in determining what types of high-risk patients should be screened for C. auris
- Assistance in identifying Candida isolates to the species level in sterile and nonsterile sites among high risk patients
- *C. auris* colonization swabs and/or testing services for high-risk patients
- Confirmatory C. auris testing for suspect clinical isolates
- C. auris educational materials
- Sample C. auris protocols, policies, and/or signage
- Infection control consultation to prepare your facility for *C. auris*
- Infection control consultation to help your facility prepare for or contain C. auris



Resources for C. auris

LAC DPH: Antimicrobial Resistance Information	www.publichealth.lacounty.gov/acd/AntibioticResistance.htm
• LAC DPH: C. auris Information	www.publichealth.lacounty.gov/acd/Diseases/CandidaAuris.htm
• LAC DPH: Novel Multi-Drug Resistant Organisms	<u>publichealth.lacounty.gov/acd/Diseases/NMDRO.htm</u>
• CDC: C. auris Informational Website	www.cdc.gov/fungal/candida-auris/index.html
CDC: C. auris Testing Algorithm	www.cdc.gov/fungal/diseases/candidiasis/pdf/Testing-algorithm- by-Method-temp.pdf
• CDC: List of Countries with <i>C. auris</i> Transmission	www.cdc.gov/fungal/candida-auris/tracking-c-auris.html#world
 Environmental Protection Agency: Products Effective Against Clostridium 	www.epa.gov/pesticide-registration/list-k-epas-registered- antimicrobial-products-effective-against-clostridium

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